



Burke County Communications

E-911



PUBLIC INFORMATION REQUEST

I _____ of _____
(Print Complete Name) (Company/Agency/Street Address)

_____, _____, _____, hereby request under the
(City) (State) (Zip)

Georgia Open Records Act the following information or records kept by the Burke County 9-1-1 Center.

Information Requested For:

Date/Time Range: From _____ to _____

Incident Location: _____

Incident Number: _____ - _____ Type of Incident: _____

Other information (specify type): _____

Types of Records Requested:

☒ Computer-Aided Dispatch Report: Individual incident report.

☐ Computer-Aided Dispatch Event Summary Report: A list of incidents at a particular location.

☐ Audio Files: Audio recording.

☐ 911 Call(s)

☐ Radio Traffic

☐ Other, please specify: _____

Requestor Signature: _____ Date: _____

Contact Number: _____ Email: _____

Pursuant to O.C.G.A. § 50-18-71(c) and (d), Burke County is authorized to charge for the costs of producing documents requested. The cost of producing the same is .10¢ per page and \$10 per disc, as well as a charge for the "direct administrative costs for complying with a request under this code section." This means you will be charged the hourly salary of the lowest paid full-time employee who has the necessary skill and training to perform the request, which is \$14.99 per hour. However, you will not be charged for the first fifteen (15) minutes spent on your request.

*If a fee is associated with your request, you will be notified prior to fulfilling the request. *

Please submit the completed form to: E911PublicInfo@burkecounty-ga.gov